compensation provided is not an adequate relief which depends on a variety of reasons. Unless you make a suitable provision for allowing those persons to get back into service, there is no question of welfare of labour being provided here. I am submitting that the intention with which you are enacting this Bill is not going to be served. So, I oppose this legislation.

†Sri B. VAIKUNTA BALIGA.—Sir, I do not wish to get into any detail. But I must certainly repudiate the suggestion that was made by Mr. Arumugham that it was a vote catching device to attract the capitalists which is an unfounded remark and I do not know whether his speech is also one of vote catching.

Mr. SPEAKER.—The question is:

"That the Mysore Shops and Commercial Establishments Bill, 1961, as passed by the Legislative Council, and as amended be passed."

The motion was adopted.

THE MYSORE NURSES, MIDWIVES AND HEALTH VISITORS BILL, 1960.

Motion to consider

Sri K. K. HEGDE (Minister for Health).—I beg to move:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, be taken into consideration."

Mr. SPEAKER.—Motion moved:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, be taken into consideration."

(Mr. DEPUTY SPEAKER in the Chair)

†Sri K. K. HEGDE.—Sir, this is a Bill involving all the nursing and midwifery staff in the whole State. So far we are having different enactments in different areas of the State and to have uniform legislation and to have uniform control over nursing profession in the State, this Bill has been brought before the Assembly and the whole Bill has been drafted after careful consideration after going through the various Bills in the whole State and in consultation with the W. H. O. The Bill consists of about seven parts. The first part gives a short title and definitions; the second part refers to constitution of Nursing Council and various procedures to be followed in the election and nomination of the Members of the Council and disqualifications and disabilities to become members of the Council and how to fill up vacancies thereto. Part III consists of registration of nurses and midwives and their qualifications; part IV refers to qualifications required in particular areas and municipalities. Part V relates to nurses establishments and the last

(Sri K. K. HEGDE)

Chapter refers to penalties to be imposed for defaulters and removal of their names from register due to death or otherwise, the powers of State Government, power to removal of difficulties and the rule making powers. There were some representations made in this connection and in view of those representations and some administrative difficulties, the Government have moved some amendments to make the Bill easy and helpful. I hope the House will be pleased to pass the Bill.

†Sri M. C. NARASIMHAN.—Sir, in principle it may appear that this Bill is a welcome measure because so far as the old Mysore area was concerned, there was no such legislation as such and it is sought to be made on the lines of legislation prevalent elsewhere. there are a few aspectsof the Bill which may make the working of the Act rather difficult and especially the nursing talent in the country is so scarce, it may make it very difficult. It is true that we have always in a case like this to harmonise or balance betweent wo considerations on the one hand providing for certain degree of nursing talent or nursing services and on the other hand the existting situation and the desirability of providing as much service as possible to as large a number as possible. I am having in mind that many of the restrictions that are sought to be placed looking into the wording of the Act may be too rigid and drive away a lot of existing practising nurses and practising midwives out of the purview of the legislation and it may create difficulties and particularly in the rural areas it may lead to a lot of difficulties. And, the qualifications which you prescribe and the restrictions you seek to enforce in this legislation may not be capable of being enforced and if enforced, the little talent that is available, the little services that are rendered in the rural areas may be deprived of and that might lead to a serious difficulty. I know after all that this problem arises in growing and developing economies. But in some of the foreign countries, the standards are high—it may be said. But two or three decades ago, they did not have such a high quality of service. They tried to solve the problem but not merely insisting on high quality, but also trying to take advantage of the available services from the point of view of qualifications and from the point of view of rigorous enforcement of certain standard. There may not be adequacy. But topmost paramedical personnel were taken advantage of. I am afraid that this Bill may come in the way of such utilization of the available services in the nursing field. With these general remarks, I am making one or two observations. In other words, this is no doubt a welcome measure. My criticism could be taken care of by a careful enforcement. In the enforcement of this Bill, one ought not to be too rigid and should try to be as liberal as possible. If that is taken care of, all the mischief which would ensure from the wording of the enactment may be avoided.

Part 3 provides for registration of various services that are enumerated, midwives, nurses, auxiliaries and health visitors.

The clause is rather strange. The wording is really rather strange. It leaves everything to rule-making power. It leaves everything to the department and the Government. It is not a minor provision. In the whole Bill, the most important provision is the one pertaining to the registration of nurses, etc. Every other regulation follows from this principal clause. The very aim and object of this legislation is to provide for registration of nurses. When this is such a vital matter, which is the fulcrum of the entire legislation, it ought not to be left to the rule-making power. It should not be left completely to the discretion of the Government. It should not be something like subordinate legislation. It is really delegation of the power that the Bill seeks to give to authorities. If we leave it as vague as it is, I am afraid, we will not be able to achieve anything. What is the standard? If you say you are insisting on quality, which are the types of examinations, which are the types of standards that you expect? You should have laid down in the schedule to the Act which are the examinations prescribed for nurses, for the midwives and which are the examinations for the training prescribed for health visitors. In fact, these examinations are there possible. All these are codified and virtually they are available. They could have said by these examinations we are seeking to recognise and no other. We know full well that there is in this State no private institution which provides for courses of training or which is holding examinations.

Sri K. K. HEGDE.—There are.

Sri M. C. NARASIMHAN.—If there are, they are already recognised. They are well within the purview of the Government. Then what is the difficulty in giving an indication to the House which are the standards. It is true that certain matters are to be provided in the rules. Every detail need not be provided in the Bill. But this clause is the central clause. It is an ancillary clause. It is the main clause. This sort of delegation is not very desirable thing, especiall in a matter like this where the controvesy will be controversy *versus* principle, controversy *versus* utilization of available nursing in the State.

There is another clause–clause 14-where the State Council is entitled to refuse to register any person. It is true that the Council is generally entitled to as in the case of similar legislation elsewhere—Medical Practitioners' Council, etc. A board like that should be empowered to refuse registration. But it must be on certain valid grounds, on certain well known grounds. Here in this case, no well known grounds are there ; not even grounds are stated. It simply states : ".....refuse to enter in the register the name of any person or may order the removal of the name of such person from the register." This is liable to be abused. When such wide powers are given to the Council, when you don't put any ristrictions on those powers, it is likely that it may be abused. Some safeguard must be there especially in the case of those who are engaged in the profession who may not be able to come up to that standard, but whose valuable experience the State cannot deprive itself of.

(Sri M. C. NARASIMHAN)

Now, the other important clause is 19. This may definitely work as a hardship. Because the requirement is that not merely should the name of the nurse, midwife or health visitor be entered in the register—even for entry there are so many safeguards and the Nursing Council has to go into the matter by prescribing certain examinations. Unless the persons pass the examinations, their names will not be entered in the register. However, an experience of five years of regular practice ought to be there. This is rather contradictory. A person shall not practice unless he or she has put in five years of service. How can the two things go. I do not know if the point is appreciated. In order to be entitled to practice as a nurse, he or she must have put in five years of service. In order to have that experience, she must have worked as a nurse. It looks to be rather contradictory in terms, the conditions of which may not be fulfilled.

Sri C. M. ARUMUGHAM.—To practice as nurse, he or she must have put in five years of experience. To practice before a licence is issued--it is not possible. What should be done in this case? Should the practice be in the residence alone?

Sri K. K. HEGDE.—I will reply at the end.

12-00 NOON

Sri M. C. NARASIMHAN.—Because you will see that under section 13 any person is not entitled to get registered unless he undergoes such courses of training or such examinations and fulfils such other conditions.

Sri S. D. KOTHAWALE.—I do not think there is any contradiction.

Sri K. K. HEGDE.—Part IV will come into operation in particular areas where we may require some higher standard. If Government feel that a higher standard is required, this clause will come into operation ; not otherwise.

Sri M. C. NARASIMHAN.—While thanking the Minister for the explanation, the point is whether it is desirable to have such restriction.

Sri S. D. KOTHAWALE.—In section 19 the sub-sections (*a*) and (*b*) are similarly worded except for the difference in the period.

Sri K. K. HEGDE.—The production of certificate from an institution refers to (*b*) and not to (*a*).

Sri M. C. NARASIMHAN.—There are certain sections which regulate the nurses' establishments. I was feeling shat some of the powers vested in the licensing authority under section 22 are too wide. For example, sub-section (4) (*i*) says :—

> "The application or the holder of the licence is below twenty-one years or is in its opinion not a suitable person to hold such licence ;"

Any nursing establishment can continue to practise as a nursing establishment only if they satisfy certain requirements laid down in sub-sections (1), (2), etc. In addition, you provide that the licensing authority may refuse to grant or revoke and licence if it feels that the applicant is not a suitable person to hold the licence. We do not know what is meant by a suitable person. You do not say that the order refusing to grant a licence to an applicant for running a nurses establishment should be in writing. If it is not in writing, I do not know how it will be possible for any appellate authority to decide whenever a matter comes up in appeal as to on what grounds an application has been refused. The order must be in writing and it must contain sufficiently valid grounds and not vague things as in sub-section (4) (*i*). After all, in our State the nursing talent is very inadequate to meet the needs of the situation. Trained nurses, auxilliary personnel and the paramedical personnel available even at the end of the third plan would be far inadequate to meet the needs of the situation. Against such a background, we should be rather careful while enforcing some of these laws. It is true that a similar legislation is there in Bombay and Madras, but these laws have been in force since a long time and the whole situation has got itself adjusted. But here the position is different.

Under sub-section (8) of section 22, the State Government is entitled to refuse to register or to cancel a licence given by a licensing authority to any nursing establishment. It may be necessary that such power should be vested in the State, but in a matter like this there should be provision for appeal to some other authority. Here, there is no appeal provided. It is a restriction on the profession of nursing. Running a nursing establishment is just like a trade. After all, under the Constitution, you can impose reasonable restrictions; but this is too wide a power. We do not know under what circumstances the licence given by the licensing authority will be revoked or cancelled or refused. In such cases, it is customary in legislation to provide for an appeal to a higher authority. Here, there is no provision for appeal.

In the case of Council, it is not entitled to revoke or cancel a licence. It is the licensing authority that can cancel or revoke a licence. But the Council can only make a recommendation to the Government for revoking or cancelling. When the counil makes a recommendation that the licence should be cancelled there is no appeal.

Sri K. K. HEGDE.—The Council acts as an inspecting authority.

Sri M. C. NARASIMHAN.—Lastly I want to say one thing about the working of the council. After all this council should be treated for all practical purposes as an autonomous body. There is no need for the Government to exercise control over the working of the council. Since this is a professional body which is expected in course of time to help establish very good norms in the nursing profession, it should be an autonomous body with wide powers. There should be no difficulty to keep it autonomous, because the members of the body are high officers

(Sri M. C. NARASIMHAN)

like the Director of Medical Services, etc. The Government element on the council is preponderant. In view of this also, it is necessary to make it an autonomous body. But unfortunately it is not so and all bye-laws made by the council are subject to final approval of the Government. It cannot make even bye-laws; it is subject to the ultimate control of the State Government. I can understand Government taking action when the council does not function. Even the bye-laws of the Panchayats are not under the control of the Government where large funds are provided. After all you are laying down rules and there should be no further control. The control that is sought to be put is very wide and I want to know whether it is so necessary. Does the Government think that the Council would not be in a position to discharge its functions? The Council consists of high level officers. It means you are distrusting your own officers.

I once again submit that in the working of the Act there may be certain difficulties and there may be too many restrictions on the nursing profession and it may create difficulty whereby we will not be able to take advantage of getting nursing personnel.

Sri K. K. HEGDE.—I think the Hon'ble Member for the suggestions and criticisms made. He said that there should not be any restriction so far as nursing profession is concerned. In clause 17 we have made it clear that any person who has been in practice can be listed. Further Clause 19 is operative only in special places to be notified. We are not restricting anything. If some of the corporation or municipalities require better qualifications, we are enabling them and that they can do by notification.

The Hon'ble Member referred to the qualifications and said that they are too rigid because they are operative in Madras, Bombay and Hyderabad areas. He should know that this State consists of large areas from those places.

He said that the council should be made more autonomous. We have made the council as autonomous as possible but with some power of control by the Government.

Sri S. D. KOTHAWALE.—Clause 23 deals with training institutions. It provides for institutions which are to be approved and recognised for the purpose of training nurses midwives auxilliary nurse-midwives or health visitors and sending them for examination for the qualifying certificates of the Council. Under sub-clause (3) how can a non-recognised institution issue a certificate?

Sri K. K. HEGDE.—The non-recognised institutions and hospitals are not entitled to issue certificates.

Mr. DEPUTY SPEAKER.—The question is :

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960 be taken into consideration."

The motion was adopted.

Clause by Clause Considertion.

Mr. DEPUTY SPEAKER.—Clause 2.

Sri K. K. HEGDE.—I move :

"That in item (1) for the word 'nursing' the word 'midwifery' shall be substituted."

Mr. DEPUTY SPEAKER.—Amendment moved :

"That in item (i) for the word 'nursing' the word 'midwifery' shall be substituted."

Sri K. K. HEGDE.—The training is in midwifery instead of in nursing. Therefore this amendment has been suggested.

Mr. DEPUTY SPEAKER.—The question is :

"That in item (i) for the word 'nursing' the word 'midwifery' shall be substituted."

The amendment was adopted.

Mr. DEPUTY SPEAKER.—The question is :

"That Clause 2 as amended, stand part of the Bill."

The motion was adopted.

Clause 2, as amended, was added to the Bill.

Mr. DEPUTY SPEAKER.—Clause 3.

Sri K. K. HEGDE.—I beg to move :

1. "That for item (*b*) (i) of sub-clause (2) the following item shall be substituted, namely:—

(i) eight persons to be elected from amongst themselves by (*aa*) nurses, (*bb*) midwives (*cc*) auxiliary nurse-midwives and (*dd*) health visitors registered in the register, the number of persons to be elected from each category being so divided as to be in the proportion of the number of their members in the register:

Provided that in determining the said proportion, a fraction of one-half or less shall be neglected and a fraction of more than one-half shall be counted as one:

Provided further that the number of members to be elected representing any particular category shall be at least one."

2. "The proviso to item (*b*) of sub-clause (2) shall be omitted."

Mr. DEPUTY SPEAKER.—Amendment moved :

1. "That for item (*b*) (i) of sub-clause (2) the following item shall be substituted, namely:—

(i) eight persons to be elected from amongst themselves by (*aa*) nurses, (*bb*) midwives (*cc*) auxiliary nurse-midwives and (*dd*) health visitors registered in the register, the number of persons to be elected from each category being so divided as to be in the proportion of the number of their members in the register:

Provided that in determining the said proportion, a fraction of one-half or less shall be neglected and a fraction of more than one-half shall be counted as one:

Provided further that the number of members to be elected representing any particular category shall be at least one."

2. "The proviso to item (*b*) of sub-clause (2) shall be omitted."

Sri K. K. HEGDE.—This is a consequence of the change in the category of maintenance of rigisters. In the original Bill, it is said that division wise registers should be maintained. But the difficulty arises and it is not possible to have divisionwise registers. If a nurse registered in one division is transferred to another division, further registration will become necessary. So, if the divisionwise register is removed, this has also to be amended. Hence the amendment is proposed.

Mr. DEPUTY SPEAKER.—The question is :

"That for item (*b*) (i) of sub-clause (2) the following item shall be substituted, namely :—

(i) eight persons to be elected from amongst themselves by (*aa*) nurses, (*bb*) midwives (*cc*) auxiliary nurse-midwives and (*dd*) health visitors registered in the register, the number of persons to be elected from each category being so divided as to be in the proportion of the number of their member in the register :

Provided that in determining the said proportion, a fraction of one-half or less shall be neglected and a fraction of more than one-half shall be counted as one ;

Provided further that the number of members to be elected representing any particular category shall be at least one."

2. "The proviso to item (*b*) of sub-clause (2) shall be omitted."

The amendment was adopted.

Mr. DEPUTY SPEAKER.—The question is :

"That Clause 3 as amended stand part of the Bill."

The motion was adopted.

Clause 3, as amended, was added to the Bill.

Mr. DEPUTY SPEAKER.— The question is :

" That Clauses 4 to 11, both inclusive, stand part of the Bill."

The motion was adopted.

Clauses 4 to 11, both inclusive, were added to the Bill.

Mr. DEPUTY SPEAKER.—Clause 12.

Sri K. K. HEGDE.—I beg to move :

"That for Section 12, the following section shall be substituted, namely :—

12, Maintenance of register : The Council shall maintain a register of (*a*) nurses, (*b*) midwives, (*c*) auxiliary nurses and (*d*) health visitors, consisting of four sections, in such form, containing such particulars and divided into such parts as may be prescribed."

Mr. DEPUTY SPEAKER.—Amendment moved :

"That for Section 12, the following section shall be substituted, namely :—

12, Maintenance of register : The Council shall maintain a register of (*a*) nurses, (*b*) midwives, (*c*) auxiliary nurses and (*d*) health visitors, consisting of four sections, in such form, containing such particulars and divided into such parts as may be prescribed."

Sri K. K. HEGDE.—I have already mentioned that it is not possible to maintain division wise registers. So, we thought it desirable to have one register. Hence this amendment is moved.

Mr. DEPUTY SPEAKER.—The question is :

"That for Section 12, the following section shall be substituted, namely :—

12, Maintenance of register : The Council shall maintain a register of (*a*) nurses, (*b*) midwives, (*c*) auxiliary nurses and (*d*) health visitors, consisting of four sections, in such from, containing such particulars and divided into such parts as may be prescribed."

The amendment was adopted.

Mr. DEPUTY SPEAKER.—The question is :

"That Clause 12, as amended, stand part of the Bill.

The motion was adopted.

Clause 12, as amended was added to the Bill.

Mr. DEPUTY SPEAKER.—Clause 13.

Sri K. K. HEGDE.—I beg to move :

"That sub-clause (2) shall be omitted."

Mr. Deputy Speaker.—Amendment moved :

"That sub-clause (2) shall be omitted."

Sri K. K. Hegde.—This is a consequential amendment because o not maintaining divisional registers.

Mr. Deputy Speaker.—The question is :

"That sub-clause (2) shall be omitted."

The amendment was adopted.

Mr. Deputy Speaker.—The question is :

"That Clause 13, as amended, stand part of the Bill."

The motion was adopted.

Clause 13, as amended, was added to the Bill.

Mr. Deputy Speaker.—The question is :

"That Clauses 14 and 15 stand part of the Bill."

The motion was adopted.

Clauses 14 and 15 were added to the Bill.

Mr. Deputy Speaker.—Clause 16.

Sri K. K. Hegde.—I beg to move :

"That in sub-clause (1), after the words 'the Council may' the words 'with the previous sanction of the State Government' shall be inserted.

In sub-clause (2), for the words 'the Council may' the words 'the Council may after giving notice to the defaulter concerned' shall be substituted."

Mr. Deputy Speaker.—Amendment moved :

"That in sub-clause (1), after the words 'the Council may' the words 'with the previous sanction of the State Government' shall be inserted.

In sub-clause (2), for the words 'the Council may' the words 'the Council may after giving notice to the defaulter concerned' shall be substituted."

Sri K. K. Hegde.—This is again intended not to have renewal fees in the case of nurses once in three years. They may be in various parts of the State mostly in villages and they may find it difficult to pay renewal fees. The Government have taken the right to know whether the renewal fees will be necessary or not. If the funds are not sufficient to maintain the Council, then the Government will have the right to approve the levy of renewal fee. The idea of the second amendment is to give defaulter sufficient notice before removing the name from the Register.

MR. DEPUTY SPEAKER.—The question is :

"That in sub-clause (1), after the words 'the Council may' the words 'with the previous sanction of the State Government' shall be inserted.

In sub-clause (2), for the words 'the Council may' the words 'the Council may after giving notice to the defaulter concerned' shall be substituted."

The amendment was adopted.

MR. DEPUTY SPEAKER.—The question is :

"That Clause 16, as amended, stand part of the Bill.

The motion was adopted.

Clause 16, as amended, was added to the Bill.

12-30 P. M.

Clause 17 to 29

MR. DEPUTY SPEAKER.—The question is :

"That Clauses 17 to 29, both inclusive stand part of the Bill."

The motion was adopted.

Clauses 17 to 29, both inclusive, were added to the Bill.

Clause 30.

MR. DEPUTY SPEAKER —There is an amendment.

Sri K. K. HEGDE.—Sir, I beg to move :

"That in sub-clause (i), item (*q*) shall be omitted."

MR. DEPUTY SPEAKER.—Amendment moved :

"That in sub-clause (i), item (*q*) shall be omitted."

Sri K. K. HEGDE.—This is a consequential amendment and therefore I request the House to accept the same.

MR. DEPUTY SPEAKER.—The question is :

"That in sub-clause (*i*), item (*q*) shall be omitted."

The amendment was adopted.

MR. DEPUTY SPEAKER.—The question is :

"That Clause 30, as amended, stand part of the Bill."

The motion was adopted

Clause 30, as amended, was added to the Bill.

Clauses 31to 33

MR. DEPUTY SPEAKER.—The question is :

"That Clauses 31, 32 and 33, stand part of the th

The motion was adopted.

Clauses 31 to 33, both inclusive, were added to the Bill.

Clause 34

Sri K. K. HEGDE.—Sir, I beg to move :

"That after the words and brackets '(Madras Act III of 1926)", the words figures, and brackets 'the Hyderabad Nurses, Midwives and Health Visitors Registration Act, 1951 (Hyderabad Act XIX of 1951,' shall be inserted."

Mr. DEPUTY SPEAKER.—Amendment moved :

"That after the words and brackets '(Madras Act III of 1926)", the words, figures, and brackets 'the Hyderabad Nurses, Midwives and Health Visitors Registration Act, 1951 (Hyderabad Act XIX of 1951)' shall be inserted."

Sri K. K. HEGDE.—Sir, this is due to the fact that in the Hyderabad-Karnatak area, there is another Act governing that area with the idea of repealing, that is inserted along with the other acts of Madras and Bombay.

Mr. DEPUTY SPEAKER.—The question is :

"That after the words and brackets '(Madras Act III of 1926)', the words, figures, and brackets 'the Hyderabad Nurses, Midwives and Health Visitors Registration Act, 1951 (Hyderabad Act XIX of 1951)' shall be inserted."

The amendment was adopted.

Mr. DEPUTY SPEAKER.—The question is :

"That Clause 34, as amended stand part of the Bill."

The motion was adopted.

Clause 34, as amended, was added to the Bill.

Clause 35

Mr. DEPUTY SPEAKER.—The question is :

"That Clause 35 stand part of the Bill.

The motion was adopted.

Clause 35 was added to the Bill.

Clause 1

Mr. DEPUTY SPEAKER.—For Clause 1, there is an amendment.

Sri K. K. HEGDE.—Sir, I beg to move :

"That for item (*a*) of sub-clause (3), the following item shall be substituted, namely:-

(*a*) (i) part I and section 29 of Part VII of this Act shall come into force at once in the whole of the State of Mysore.

(ii) parts II, III, V and VI and the remaining sections of Part VII of this Act shall come into force in the whole of the State of Mysore on such date as the State Government may by notification appoint".

Mr. DEPUTY SPEAKER.—Amendment moved :

"That for item (*a*) of sub-clause (3), the following item shall be substituted, namely:–

(*a*) (i) Part I and section 29 of this Act shall come into force at once in the whole of the State of Mysore.

(ii) Parts II, III, V and VI the remaining section of Part VII of this Act shall come into force in the whole of the State of Mysore on such date as the State Government may by notification appoint."

† Sri K. K. HEGDE.—The idea of having Part I and section 29 to come into force immediately was with the idea of framing rules immediately and bring the enactment into force. To have Parts II, III, V and VI and the remaining sections of Part VII by notification is because, in the Hyderabad area, it is still the Central Act that is in force. Unless that is repealed, we cannot have this throughout the State. So we intend having all this come into operation after the Central Act is withdrawn. After the Andhra Pradesh Government a reference, I think, this will be withdrawn. Then we will bring it into force under a separate notification throughout the State. Therefore, I request the House to accept the amendment.

Mr. DEPUTY SPEAKER.—The question is:

"That for item (*a*) of sub-clause (3), the following item shall be substituted, namely:—

(*a*) (i) Part I and section 29 of Part VII of this Act shall come into force at once in the whole of the State of Mysore.

(ii) Parts II, III, V and VI and the remaining sections of Part VII of this Act shall come into force in the whole of the State of Mysore on such date as the State Government may by notification appoint."

The amendment was adopted.

Mr. DEPUTY SPEAKER.—The question is:

" That Clause 1 as amended, do stand part of the Bill."

The motion was adopted.

Clause 1, as amended, was added to the Bill.

Mr. DEPUTY SPEAKER.—The question is:

"That as the Preamble and the Short Title stand part of the Bill."

The motion was adopted.

The Preamble and the Short Title were added to the Bill.

Motion to pass

Sri K. K. HEGDE.—Sir, I beg to move:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, as amended, be passed."

Mr. DEPUTY SPEAKER.—The question is:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, as amended, be passed."

The motion was adopted.

Mr. DEPUTY SPEAKER.—The House will now adjourn for lunch and meet at 3-00 P.M.

The House adjourned for recess at Forty Minutes past Twelve of the Clock and reassembled at Ten Minutes past Three of the Clock.

[Mr. DEPUTY SPEAKER in the Chair]

MYSORE AYURVEDIC AND UNANI PRACTITIONERS' REGISTRATION AND MEDICAL PRACTITIONERS' MISCELLANEOUS PROVISIONS BILL, 1960 AS REPORTED BY SELECT COMMITTEE.

Motion to Consider.

Sri K. K. HEGDE (Minister for Health).—Sir, I beg to move:

"That the Mysore Ayurvedic and Unani Practitioners' Registration and Medical Practitioners' Miscellaneous Provisions Bill, 1960, as reported by the Select Committee, be taken into consideration."

Mr. DEPUTY SPEAKER.—Motion moved:

"That the Mysore Ayurvedic and Unani Practitioners' Registration and Medical Practitioners' Miscellaneous Provisions Bill, 1960 as reported by the Select Committee, be taken into consideration."

†Sri K. K. HEGDE.—This Bill which had come up before this House in July last, has been referred to the Select Cammittee consisting of 12 members and a report of the Committee was submitted to the same session. The Committee had six sittings and made some recommendations and they have suggested some changes. In item (1) of clause 2, in the definition they would like to add the definition of 'integrated system'. In sub-clauses (1) and (2) of Clause 3, instead of having two Boards for the different systems of medicine, the Committee felt that there should be only one Joint Board. In sub-clause (3) the Committee recommended that instead of the President of the Board being a person